24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
House Majority PAC	
	C C00495028
Check if 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee	Date of Public Distribution/Dissemination
Waterfront Strategies	M M / D D / Y Y Y Y
Mailing Address 3050 K St NW	05 31 2016 Amount
Ste 100	
City State Zip Code	143051.00
Washington DC 20007-5108	Transaction ID: VN7GDA199C5 Date of Disbursement or Obligation
Purpose of Expenditure Television Advertising Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: X House District: 24
Salud Carbajal Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	orsement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
	D. C. (Dist.)
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Type	
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disbu	ursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	143051.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7
(c) TOTAL Independent Expenditures	
(b) 101A2 masperiatin Experiation	143051.00
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	•
Alixandria Lapp	M / D D / Y Y Y Y
[Electronically Filed] Date Signature	6 01 2016
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